Adopted

Rejected

## COMMITTEE REPORT

YES: 11 NO: 2

## MR. SPEAKER:

Your Committee on <u>Public Health</u>, to which was referred <u>Senate Bill 138</u>, has had the same under consideration and begs leave to report the same back to the House with the recommendation that said bill be amended as follows:

- Delete the title and insert the following:

  A BILL FOR AN ACT to amend the Indiana Code concerning
- 3 professions and occupations.
- 4 Page 2, between lines 7 and 8, begin a new line block indented and
- 5 insert:
- 6 "(8) Indiana board of pharmacy.
- 7 **(9) Indiana state board of nursing.**".
- 8 Page 2, line 13, delete "chiropractic physician" and insert
- 9 "chiropractor".
- Page 2, between lines 15 and 16, begin a new paragraph and insert:
- "SECTION 2. IC 25-22.5-2-7 IS AMENDED TO READ AS
- FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. The board shall do
- the following:
- 14 (1) Adopt rules and forms necessary to implement this article that
- 15 concern, but are not limited to, the following areas:
- 16 (A) Qualification by education, residence, citizenship,

1	training, and character for admission to an examination for
2	licensure or by endorsement for licensure.
3	(B) The examination for licensure.
4	(C) The license or permit.
5	(D) Fees for examination, permit, licensure, and registration
6	(E) Reinstatement of licenses and permits.
7	(F) Payment of costs in disciplinary proceedings conducted by
8	the board.
9	(G) Establishment of mandatory continuing education
10	requirements designed to maintain the competency of
11	individuals licensed under this chapter, including
12	requirements providing that only educational activities
13	that meet professional role expectations satisfy continuing
14	education requirements.
15	(2) Administer oaths in matters relating to the discharge of its
16	official duties.
17	(3) Enforce this article and assign service bureau personnel duties
18	as may be necessary in the discharge of the board's duty.
19	(4) Maintain, through the service bureau, full and complete
20	records of all applicants for licensure or permit and of all licenses
21	and permits issued.
22	(5) Make available, upon request, the complete schedule of
23	minimum requirements for licensure or permit.
24	(6) Issue, at the board's discretion, a temporary permit to an
25	applicant for the interim from the date of application until the
26	next regular meeting of the board.
27	(7) Issue an unlimited license, a limited license, or a temporary
28	medical permit, depending upon the qualifications of the
29	applicant, to any applicant who successfully fulfills all of the
30	requirements of this article.
31	(8) Adopt rules establishing standards for the competent practice
32	of medicine, osteopathic medicine, or any other form of practice
33	regulated by a limited license or permit issued under this article
34	(9) Adopt rules regarding the appropriate prescribing of Schedule
35	III or Schedule IV controlled substances for the purpose of weigh
36	reduction or to control obesity.
37	SECTION 3. IC 25-22.5-7-1 IS AMENDED TO READ AS
38	FOLLOWS [FFFFCTIVE IIII V 1 1999]: Sec. 1 (a) A license issued

under this article expires on June 30 of each odd-numbered year. Before June 30 of an odd-numbered year, an applicant for renewal shall pay the biennial renewal fee set by the board under IC 25-22.5-2-7.

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- (b) If the holder of a license does not renew the license by June 30 of each odd-numbered year, the license expires and becomes invalid without any action taken by the board. A license that becomes invalid under this subsection may be reinstated by the board up to three (3) years after the invalidation if the holder of the invalid license: pays:
  - (1) **pays** the penalty fee set by the board under IC 25-22.5-2-7; and
  - (2) pays the renewal fee for the biennium; and
  - (3) completes the continuing education requirement established by the board.
- (c) If a license that becomes invalid under this section is not reinstated by the board within three (3) years of its invalidation, the holder of the invalid license may be required by the board to take an examination for competence before the board will reinstate the holder's license.
- (d) The board may adopt rules under IC 25-22.5-2-7 establishing requirements for the reinstatement of a lapsed license.
- (e) An individual may not renew a license under this article unless the individual has completed the continuing education requirements established under IC 25-22.5-2-7(1)(G). An application under this section must contain a sworn statement signed by the applicant attesting that the applicant has fulfilled the continuing education requirements.
- (f) Every two (2) years, the board may randomly audit for compliance at least one percent (1%) but not more than ten percent (10%) of the practitioners required to take continuing education courses.
- (g) Notwithstanding IC 25-22.5-2-7(1)(G), the continuing education requirement does not apply to the following:
  - (1) A practitioner who has held an initial license for less than two (2) years.
  - (2) A practitioner who the board has determined is unable to meet the requirement due to a disability.
- (h) For each continuing education course attended or completed, the practitioner shall retain:

1	(1) a record of the number of hours spent in each continuing
2	education course;
3	(2) the subject matter presented;
4	(3) the name of the sponsoring organization; and
5	(4) verification of attendance or completion;
6	for three (3) years after the date the practitioner's license was
7	renewed.
8	SECTION 4. IC 25-23-1-7 IS AMENDED TO READ AS
9	FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 7. (a) The board shall
10	do the following:
11	(1) Adopt under IC 4-22-2 rules necessary to enable it to carry
12	into effect this chapter.
13	(2) Prescribe standards and approve curricula for nursing
14	education programs preparing persons for licensure under this
15	chapter.
16	(3) Provide for surveys of such programs at such times as it
17	considers necessary.
18	(4) Accredit such programs as meet the requirements of this
19	chapter and of the board.
20	(5) Deny or withdraw accreditation from nursing education
21	programs for failure to meet prescribed curricula or other
22	standards.
23	(6) Examine, license, and renew the license of qualified
24	applicants.
25	(7) Issue subpoenas, compel the attendance of witnesses, and
26	administer oaths to persons giving testimony at hearings.
27	(8) Cause the prosecution of all persons violating this chapter and
28	have power to incur necessary expenses for these prosecutions.
29	(9) Adopt rules under IC 4-22-2 that do the following:
30	(A) Prescribe standards for the competent practice of
31	registered, practical, and advanced practice nursing.
32	(B) Establish with the approval of the medical licensing board
33	created by IC 25-22.5-2-1 requirements that advanced practice
34	nurses must meet to be granted authority to prescribe legend
35	drugs and to retain that authority.
36	(C) Establish continuing education requirements designed
37	to maintain the competency of individuals licensed under
38	this chapter, including requirements providing that only

1	educational activities that meet professional role
2	expectations satisfy continuing education requirements.
3	(10) Keep a record of all its proceedings.
4	(11) Collect and distribute annually demographic information on
5	the number and type of registered nurses and licensed practical
6	nurses employed in Indiana.
7	(12) Notify each registered nurse and licensed practical nurse
8	residing in Indiana when final rules concerning the practice of
9	nursing are published in the Indiana register.
10	(b) The board may do the following:
11	(1) Create ad hoc subcommittees representing the various nursing
12	specialties and interests of the profession of nursing. Persons
13	appointed to a subcommittee serve for terms as determined by the
14	board.
15	(2) Utilize the appropriate subcommittees so as to assist the board
16	with its responsibilities. The assistance provided by the
17	subcommittees may include the following:
18	(A) Recommendation of rules necessary to carry out the duties
19	of the board.
20	(B) Recommendations concerning educational programs and
21	requirements.
22	(C) Recommendations regarding examinations and licensure
23	of applicants.
24	(3) Appoint nurses to serve on each of the ad hoc subcommittees.
25	(c) Nurses appointed under subsection (b) must:
26	(1) be committed to advancing and safeguarding the nursing
27	profession as a whole; and
28	(2) represent nurses who practice in the field directly affected by
29	a subcommittee's actions.
30	SECTION 5. IC 25-23-1-16.1 IS AMENDED TO READ AS
31	FOLLOWS [EFFECTIVE JULY 1, 1999]: Sec. 16.1. (a) A license to
32	practice as a registered nurse expires on October 31 in each
33	odd-numbered year. Failure to renew the license on or before the
34	expiration date will automatically render the license invalid without
35	any action by the board.
36	(b) A license to practice as a licensed practical nurse expires on
37	October 31 in each even-numbered year. Failure to renew the license
38	on or before the expiration date will automatically render the license

1	invalid without any action by the board.
2	(c) The procedures and fee for renewal shall be set by the board.
3	(d) At the time of license renewal, each registered nurse and each
4	licensed practical nurse shall pay an additional three dollar (\$3) fee.
5	The lesser of the following amounts from fees collected under this
6	subsection shall be deposited in the impaired nurses account of the
7	state general fund established by section 34 of this chapter:
8	(1) Three dollars (\$3) per license renewed under this section.
9	(2) The cost per license to operate the impaired nurses program,
10	as determined by the health professions bureau.
11	(e) To renew a license under this section, an individual must
12	have completed the continuing education requirements established
13	by the board under section $7(a)(9)(C)$ of this chapter. An
14	application under this section must contain a sworn statement
15	signed by the applicant attesting that the applicant has fulfilled the
16	continuing education requirements.
17	(f) Every two (2) years, the board may randomly audit for
18	compliance at least one percent (1%) but not more than ten
19	percent (10%) of the nurses required to take continuing education $% \left( 10.00000000000000000000000000000000000$
20	courses.
21	(g) Notwithstanding IC 25-22.5-2-7(1)(G), the continuing
22	education requirement does not apply to the following:
23	(1)Anursewhohasheldaninitiallicenseforlessthantwo(2)
24	years.
25	(2) A nurse who the board has determined is unable to meet
26	the requirement due to a disability.
27	(h) For each continuing education course attended or completed,
28	the nurse shall retain:
29	(1) a record of the number of hours spent in each continuing
30	education course;
31	(2) the subject matter presented;

(3) the name of the sponsoring organization; and

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(4) verification of attendance or completion;
 for three (3) years after the date the nurse's license was renewed.".
 Renumber all SECTIONS consecutively.
 (Reference is to SB 138 as reprinted February 12, 1999.)

and when so amended that said bill do pass.

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Representative Brown C